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TO: Commissioner of Patents  
FAX NO.: 703-872-9306  
FROM: Robert M. Brush  
DATE: March 15, 2004  
MATTER: Serial No. 09/813,639 Filed: 3/21/01  
DOCKET NO.: GLBL/0006  
APPLICANT: van Diggelen

The following has been received in the U.S. Patent and Trademark Office on the date of this facsimile:

<input checked="" type="checkbox"/> Response - 16 pages	<input checked="" type="checkbox"/> Transmittal Letter (2 copies)
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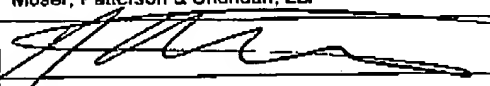
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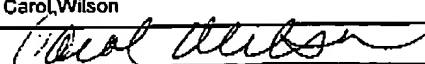
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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/813,639
	Filing Date	3/21/01
	First Named Inventor	van Diggelen
	Group Art Unit	2683
	Examiner Name	Nawara T. Omary
Total Number of Pages in This Submission	Attorney Docket Number	GLBL/006

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response – 16 pages <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		It is believed no fee is due. However, in the event a fee is due, kindly charge that fee to Deposit Account No. 20-0782. To facilitate that charge, a duplicate copy of this letter is enclosed.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Robert M. Brush, Reg. No. 45,710 Moser, Patterson & Sheridan, LLP
Signature	
Date	3-15-04

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
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PATENT APPLICATION

Applicant: **van Diggelen** Case: **GLBL 006**  
Serial No.: **09/813,639** Filed: **March 21, 2001**  
Examiner: **Nawara T. Omary** Group Art Unit: **2683**  
Title: **METHOD AND APPARATUS FOR PROVIDING LOCATION BASED  
INFORMATION**

Mail Stop Non-Fee Amendment  
COMMISSIONER FOR PATENTS  
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RESPONSE UNDER 37 C.F.R. §1.111

S I R:

In response to the Office Action dated January 8, 2004 (Paper No. 5), please  
amend the above-identified patent application as follows: